

# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved  
Office of Management  
and Budget  
No 1215-0188  
Expires 11 30-2006

This report is mandatory under P L 86-257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440

For Official Use Only



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

*Amended 8 15.05 see Attachment*

1 File Number U <u>2560</u>	2 Fiscal Year Covered From <u>1/1/04</u> Through <u>12/31/04</u>
3 Name and address of person filing Name <u>Arturo Washington</u> P O Box Bldg Room No if any _____ Street <u>1500 E. Columbia</u> City <u>Battle Creek</u> State <u>MI</u> ZIP Code + 4 <u>49014</u>	4 Name file number and address of labor organization Name <u>LIDIA #355</u> Labor Organization File Number <u>541-509</u> P O Box Building and Room Number if any _____ Street <u>1500 E. Columbia</u> City <u>Battle Creek</u> State <u>MI</u> ZIP Code + 4 <u>49014</u>
5 Position in labor organization _____	

Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests  
(except as specified in the exclusions set forth in the instructions)

A Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent	
6 Name and address of Employer (including trade name if any) Name _____ Trade Name if any _____ P O Box Bldg Room No if any _____ Street _____ City _____ State _____ ZIP Code + 4 _____	7 a Nature of Interest, Transaction or Income _____  7 b Amount _____

Signature

15 Signature and verification The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct and complete (See the section on penalties in the instructions)

Signed [Signature]

On 8.15.05 Date (269)962-8010 Telephone Number

Name of Person Filing

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name MT. LABORERS - Employers Cooperation & Ed. TRUST

Trade Name if any \_\_\_\_\_

P O Box Bldg Room No if any \_\_\_\_\_

Street 6525 Centurian DriveCity LANSINGState MT ZIP Code + 4 58912

## 9 Business deals with

☐ a Labor Organization☐ b Trust☐ c Employer

## 10 If 9 b or 9 c is checked give trust or employer's name

Name \_\_\_\_\_

Trade Name if any \_\_\_\_\_

P O Box Bldg Room No if any \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ ZIP Code + 4 \_\_\_\_\_

## 11 a Nature of such dealing

LABORERS Employers Cooperation and Education Trust (LEJET) secures projects and jobs, increases union tech market share, advertises their services, develops a workforce, and advances shared interest related interests.

## 11 b Approximate dollar value of such dealing

## 12 a Nature of interest held or income received

See Attachment

## 12 b Amount

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name \_\_\_\_\_

Trade Name if any \_\_\_\_\_

P O Box Bldg Room No if any \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ ZIP Code + 4 \_\_\_\_\_

## 14 a Nature of payment

13 b Is the Business an Employer ☐ or Consultant ☐ ?

## 14 b Amount of payment

Michigan Laborers' Health Care Fund  
Michigan Laborers' Pension Fund  
Michigan Laborers' Annuity Fund  
Michigan Laborers' Vacation Fund  
Michigan Laborers' Training and  
Apprenticeship Fund  
Michigan Laborers and Employers  
Cooperation & Education Trust Funds  
Managed for the Trustees by  
TIC International Corporation

# Michigan Laborers' Fringe Benefit Funds

6525 Centurion Drive ■ Lansing, MI 48917 9275 ■ (517) 321 7502 ■ Fax (517) 321 7508  
Toll Free 877-MI-LABOR (877-645-2267) ■ [www.michiganlaborers.org](http://www.michiganlaborers.org)

August 10, 2005

SENT VIA FAX  
(269) 962-1431



Arlandar Washington  
Local Union 355  
1500 East Columbia Avenue  
Battle Creek, MI 49014

RE **MICHIGAN LABORERS' AND EMPLOYERS'  
COOPERATION & EDUCATION TRUST FUND**  
Information on Expenses Paid by the Fund

Dear Arlandar



The US Department of Labor issued a statement on June 22, 2005, dealing with *Trusts and Form LM-30 and Form LM-10*, which indicates that a Union officer and/or employee must report on Part B of the Form LM-30 "any interests in, transactions with, or income or other benefits (including reimbursed expenses) from the trust" That statement, which includes questions and answers, can be found at

[www.dol.gov/esa/regs/compliance/olms/LM30\\_LM10\\_Trusts\\_Info.htm](http://www.dol.gov/esa/regs/compliance/olms/LM30_LM10_Trusts_Info.htm)

After consulting with the Fund's Legal Counsel, we have prepared for your information the enclosed summary of expenses paid by the Fund to you or on your behalf in calendar year 2004 or accounted for by you in 2004

Sincerely,

  
James E. Schreiber  
Administrative Manager

JES/mak

Enclosure

Xc Christopher Legghio



## MICHIGAN LABORERS' AND EMPLOYERS COOPERATION AND EDUCATION TRUST FUND

TRAVEL EXPENSES RECEIVED FROM JANUARY 1, 2004 THROUGH DECEMBER 31, 2004

## ARLANDAR WASHINGTON

CHECK DATE	PAYEE	AMOUNT	PURPOSE
10/30/2003	Disney Yacht & Beach	\$234 15	Hotel Deposit - Tri-Fund Conf 1/04
12/19/2003	Arlandar Washington	\$1,876 60	Travel Advance Tri-Fund Conf 1/04
	Mich Lab & Employ Coop	(\$147 95)	Refund of Unused Travel Advance
		<b>TOTAL \$1,962 80</b>	
10/17/2004	International Foundation	\$915 00	Regist fee - Annual Conf 11/04
11/8/2004	Arlandar Washington	\$1,900 00	Travel Advance - Annual Conf 11/04
3/18/2005	Arlandar Washington	\$368 58	Add'l travel -Annual Conference 11/04
		<b>TOTAL \$3,181 58</b>	
3/18/2004	Spartan Travel	\$383 00	Lodging - 5/23 & 5/24/04 Jt BOT Mtg
8/18/2004	Arlandar Washington	\$37 00	8/18/04 BOT Mtg Transportation
11/18/2004	Arlandar Washington	\$84 87	11/17/04 BOT Mtg - Transportation
		<b>TOTAL \$484 87</b>	

Ch. Date 8.18.04 signed over to Local #355  
Ch. Date 11.18.04 signed over to Local #355

August 15, 2005

U S Department of Labor  
Employees Standards Administration  
Office of Labor-Management Standards  
200 Constitution Avenue, NW  
Room N-5616  
Washington, D C 20210

**Re Form LM-30 Filing for Arlandar Washington, Labor Organization File No**

Dear Sir or Madam

Enclosed is my Labor Organization Office and Employee Report LM-30 for the 2004 reporting period. In filing the report, I have reviewed all of my available 2004 records as well as my recollection. I have provided my best estimate or an estimated price range for the value of the benefit received where I have no knowledge as to an exact amount.

As you know, it was not until March of the year that the Department of Labor initially announced its intention to provide additional guidance to the reporting community concerning the LM-30 report, to seek systemic compliance with these requirements, and to apply standards adopted in 2005 retroactively to 2004 as a base year in that effort. Further, the Department since that time has continued to issue and revise its compliance advice, including guidance regarding related benefit funds. My understanding is that the Department's guidance to date on LM-30 reporting is still changing and remains uncertain in various particulars.

It may be possible that a covered employer or business not listed on my LM-30 report for 2004 provided something of value as to which I have no documentary record nor any present specific recollection. In accordance with your guidance, it is my understanding that, in that circumstance, I am not required to take any further action.

This filing reflects my good faith effort to comply with the LM-30 reporting provisions and in doing so, I have relied upon the evolving guidance from the Department. The enclosed material represents my best recollection and estimate of all lawfully reported benefits that I received in 2004.

Sincerely,

A handwritten signature in black ink, appearing to read 'Arlandar Washington', with a long, sweeping horizontal line extending to the right.

Arlandar Washington

**ADDENDA TO THE LM 30 FORM WHICH IS TO  
BE INCORPORATED AND MADE PART OF THE LM-30 FORM**

**ADDENDUM A [UNSOLICITED GIFTS OR PROMOTIONAL ITEMS]**

On several occasions in 2004, I recall that I was given [ 1 ] complimentary promotional item[s] such as a [clothing item, accessory or printed material w with LIUNA logo etc ] At no time did I solicit such item[s] and they were sent to my office without my prior knowledge or authorization I did not retain possession of any of these items nor did any member of my family I have no knowledge as to the value of the item[s] and do not recall the manufacturer or provider of such [an] item[s]

**ADDENDUM B [UNSOLICITED HOLIDAY GIFTS]**

On several occasions in 2004 particularly during holiday seasons I recall that I was given complimentary items, 1 [wine and cheese basket fruit basket holiday ham holiday turkey, gourmet foods, etc ] At no time did I solicit such item[s], and it/they were sent to my office without my prior knowledge or authorization I did not retain possession of any of these items, as I shared them with the individuals in my office My actions were in line with published Office of Government Ethics guidelines, which state, "When it is not practical to return a tangible item because it is perishable, the item may at the discretion of the employee's supervisor or an agency ethics official, be given to an appropriate charity, shared within the recipient's office, or destroyed C F R 2635 205

**ADDENDUM C [UNSOLICITED GIFTS]**

**ADDENDUM D [UNSOLICITED GIFTS - GOLF]**

I recall that I received unsolicited items at golf outings/tournaments such as a sleeve of balls a golf club or golf apparel etc in connection with a round of golf which I have reported At no time did I solicit such an item and I have no specific recollection of receipt of any such item nor knowledge as to the value of the item

**ADDENDUM E [MEALS/EVENTS WITH FRIENDS]**

I have personal friendships with individuals who may be employed by reportable entities under the LMRDA, which exist separate and apart from my role as a union officer/employee In 2004 it is conceivable that I received the benefit of a meal refreshment or social event from these individuals which I did not report because I do not have any records of these personal encounters and/or have no specific recollection of any benefits received

#### **ADDENDUM F [MEAL/EVENTS WITHOUT SPECIFIC RECORDS OR RECOLLECTION]**

It is not conceivable that I received the benefit of a meal refreshment or social event from an individual who may be employed by a reportable entity under the Labor Management Reporting and Disclosure Act, which I did not report because I do not have any records of these encounters and have no specific recollection of any benefits received

#### **ADDENDUM G [PAC]**

I am not reporting any benefits that I may have received from a political action committee ( ' PAC ' ) My understanding is that PACs report all receipts and disbursements under the Federal Election Campaign Act, and I do not need to report under the Labor Management Reporting and Disclosure Act

#### **ADDENDUM H [UNION TO UNION BENEFITS]**

I am not reporting any benefits that I may have received in 2004 from labor organizations affiliated with the Laborers International Union of North America ( ' LIUNA ' ), my employer, or other labor organizations My understanding of guidance received by the AFL CIO from the Department of Labor is that benefits received from LIUNA affiliated labor organizations and other labor organizations are not reportable on the LM 30 report, and I am following that guidance